PTG/S8/22 (01-08)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)						Docket Number (Optional)		
FY 2009						3449-0477PUS1		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)						***************************************	***************************************	***************************************
Application Number 10/534,489-Conf. #7114						Filed	May 11, 2005	
Fox LIGHT DEVICE AND FABRICATION METHOD THEREOF								
Art Unit 2814						Examiner	M. A. Armand	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for fitting a reply in the above identified application.								
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):								
					Fee	Small Entity Fee		
	×	One mo	nth (37 CFR 1.1	7(a)(1))	\$130	\$65	8	130.00
		Two mo	nths (37 CFR 1,	17(a)(2))	\$490	\$245	\$	
		Three m	onths (37 CFR	1.17(a)(3))	\$1110	\$555	\$	
		Four mo	inths (37 CFR 1	.17(a)(4))	\$1730	\$865	\$	
		Five mo	nths (37 CFR 1.	.17(a)(5))	\$2350	\$1175	\$	
	Applicant claims small entity status. See 37 GFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and euthorization on PTO-2038.								payment, to
								n this form.
f am the applicant/inventor.								
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
	attorney or agent of record. Registration Number					39,538		
			attorney or age					
Registration number if acting under 37 CFR 1.34 Signature						September 21, 2009 Date		
James T. Eller, Jr.						(703) 205-8000		
Typed or printed name						Telephone Number		
NOTE: Signature of all the invarious or assignees of record of the entire interest or their representative(s) are required. Submit invitigate forms if more than one signature is required, see hellow.								
	Tot	al of _	1	forms are su	bmitted.	***************************************		******************************